

OFFICE OF CONGRESSMAN JIM LANGEVIN

FLAG REQUEST FORM

Date of Request: _			
Name:		Phone:	
Street:	City:	State:	Zip Code:
flown over the US prices include an A will be mailed to t	Capitol Building. You Architect of the Capitol he above address unles	n may order a maximum flying fee and First Cla s otherwise noted. Dep	Langevin's office. All flags as n of two flags at a time. Flag ass postage to Rhode Island and ending on the demand for flag attity and type of flag that you
3' x 5' Nyl 3' x 5' Cot 4' x 6' Nyl 5' x 8' Nyl 5' x 8' Cot	ton \$18 on \$22 on \$26	.10 (2) \$30.90 .10 (2) \$33.00 .35 (2) \$41.50 .85 (2) \$51.55 .45 (2) \$56.55	
Name to appear or	n flag certificate:		
Specific date to fly	/ flag (optional):		
0 11	on flag certificate (no	more than 300	
Checks must be m	ade payable to the Hor	orable Jim Langevin,	Office Supply Account.
Mail this complete	ed form and your check	to: Congressman Jim I 300 Centerville Ro Warwick, RI 0288	oad, Suite 200 South

If you would like to send a flag outside of Rhode Island, please check Congressman Langevin's website for pricing at http://www.house.gov/langevin/ or contact Caroline Mays in the Washington Office at 202-225-2735 with any other questions.